Please type a plus sign (+) inside this box $\rightarrow \Box$ U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE O.S. Latent and Tradelliank Office. Co. Delay and OMB control number Opposite the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number DECLARATION FOR UTILITY OR 61169.00043 (P-2944) Attorney Docket Number DESIGN PATENT APPLICATION First Named Inventor Saha et al. (37 CFR 1.63) COMPLETE IF KNOWN □ Declaration □ Declaration Submitted Submitted after Initial Application Number 10/728,496 with Initial Filing (surcharge Filing Date December 5, 2003 (37 CFR 1.16(e)) Filing Group Art Unit 2624 required Bernard Krasnic **Examiner Name** As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: the specification of which is attached hereto was filed on December 5, 2003 as United States Application Number 10/728,496 or PCT International Application Number * and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT internatinal application having a filing date before that of the application on which priority is claimed. Prior Foreign Application Foreign Filing Date **Priority** Certified Copy Attached? Number(s) (MM/DD/YYYY) Claimed Country YES NO Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

[Page 1 of 3]

Filing Date (MM/DD/YYYY)

December 5, 2002

Additional provisional application

supplemental priority data sheet PTO/SB/02B attached hereto.

numbers are listed on a

Application Number(s)

60/431,129

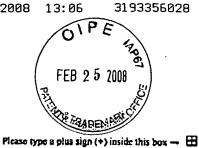
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DECLARATION – Utility or Design Patent Application								
Direct all correspondence to: ☐ Customer Number or ■ Correspondence address below								
Name Evelyn M. McConathy								
City Philadelphia		State	PA	Zip	19109			
Country US	Tele	phone	215-772-7550	Fax	215-772-7620			
PC	POWER OF ATTORNEY							
I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:								
Evelyn M. Mc	Conathy, F	Registra	ion No. 35,279					
[X] I hereby appoint the practitioner(s) associated with Customer Number 67283 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.								
[] Attached, as part of this Declaration and Power of Attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).								
DECLARATION								
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR	NAME OF SOLE OR FIRST INVENTOR							
Given Name (first and middle [if any])	Fami	ily Name o	r Surname		-			
Felix W.	Wehr	·li		T				
Inventor's Signature Flux W. heave.				Date 2	/25/08			
Residence/City: Bala Cynwyd	State PA		Country USA	Citizensl	hip USA			
Mailing Address: Conshohocken								
Mailing Address:								
City: Bala Cynwyd	State PA	<u> </u>	Zip 19004	Country	USA			
NAME OF SECOND INVENTOR:	ME OF SECOND INVENTOR:							
Given Name (first and middle [if any]) Punam Kumar Family Name or Surname Saha								
Inventor's Signature				Date				
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DECLARATION – Utility or Design Patent Application							
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City Philadelphia							
Country US		State	PA	Zip 19109			
county 03		Telephone	215-772-7550	Fax 215-772-7620			
I hereby appoint the following programmer office connected the	ractitioner(s) to prosecu	R OF ATTOR	****	business in the Patent and			
	Evelyn M. McCons	thy, Registra	tion No. 35,279				
[X] I hereby appoint the practitioner(s) associated with Customer Number 67283 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.							
Attached, as part of this Declaration and Power of Attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).							
	DE	CLARATION					
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DECLARATION		ADDITIONAL INVENTOR(S)				
		Supplement Sheet Page 3 of 3				
Name of Additional Joint Inv		☐ A petition has been filed	☐ A petition has been filed for this unsigned inventor			
Given Name (fir:	st and middle (if any))	Family	Name or Surname			
	ryon		Gomberg			
Inventor's			3			
Signature //	$^{\prime}$		Date FEB 25, 2208			
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Mailing Address: 7 GATEVIE	W COURT					
City: San Francisco'	State: CA	Zip: 94116	Country: USA			
Name of Additional Joint In	ventor, if any:	☐ A petition has been filed for this unsigned inventor				
	st and middle (if any))	Family	Family Name or Surname			
			Date.			
			Citizenship:			
Mailing Address						
City	State	Zip:	Country:			
Name of Additional Joint Inventor, if any:		☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))		Family Name or Surname				
Turning That the Control of State of St						
Inventor's	1					
Signature			Date			
Residence: City	State					
Mailing Address						
City	State	City	State			
Name of Additional Joint Inventor, if any:		☐ A petition has been filed	☐ A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname				
Inventor's Signature			Date			
Residence: City	State	Residence: City	State			
Mailing Address		Mailing Address				
City	State	City	State			
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Name of Additional Joint Inventor, if any:		☐ A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))		Family Name or Surname				
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Signature			Date			
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